

EHDI Pre-Service Coordinator Q and A 7-10

What does the flowchart tell me?

The attached flowchart maps out the referral process for children **who do not pass their initial hearing screening**. A number of situations that could lead the family to Early ACCESS are identified. The roles of audiologists, the State EHDI program, the Early ACCESS Regional Liaison (or designee), and Service Coordinators are then defined.

What is the role of the pre-service coordinator with babies referred for follow-up hearing screening?

It is important to note that children who are only in need of a follow-up hearing screening will not require the entire EA evaluation. Referrals for hearing follow up services will come on a different form with EA and EHDI logos. A "pre-service coordinator" will need to be assigned to each referral.

If a child has failed only one hearing screening, the Pre-Service Coordinator's role is to inform the family of their options for follow-up services, and to ensure that the family has access to those services (assist with arranging transportation, scheduling the appointment, etc.). Ideally, children should receive their follow-up hearing screening by one month of age. If you receive the referral after that time, the re-screen should be completed as soon as possible. Audiology best practice indicates better outcomes are achieved when hearing loss is diagnosed by three months of age. If the child fails the second hearing screening (re-screen), the family should then be offered the full EA evaluation to determine eligibility, and the service coordinator's role would be the same as with other children.

If the re-screen shows the child has normal hearing, please make a final contact with the family (letter or phone call) so they know they may contact you if they have concerns in the future.

Who should be the family's Pre-Service Coordinator?

Each Region has submitted procedures where they indicated who will be their pre-service coordinators. Follow your procedures.

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What are the family's options for the follow-up hearing screening (re-

Families have a number of options.

- Some hospitals will allow the family to bring the baby back to the hospital for the follow-up hearing screen at the two week checkup
- A family's pediatrician might provide the follow-up hearing screening
- Private practice audiologists can perform the re-screen
- AEA audiologists offer follow-up hearing screenings at no charge

Whether or not there will be an expense for the family depends on the family's insurance status, providers' insurance billing practices and fees, and the family's preferences.

Parents have the right to choose where they want to take their child for the follow-up screening, so it is important that all these options be presented to them and the cost implications discussed.

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The flowchart says the Pre-Service Coordinator will communicate back to the EHDI program.

How should this communication take place?

The Pre-Service Coordinator will need to add the Iowa Department of Public Health's EHDI program and the facility that will be doing the follow-up hearing screening to the Authorization for Exchange of Information form that the parent signs. This will allow communication with the EHDI program and screening site. The audiological results of the screening should be communicated to the EHDI program via the EHDI data system, eSP, by the audiologist as required by law. Pre-Service Coordinators can complete the Referral for Hearing/Audiology Follow Up Services form and send a copy to the IDPH EHDI program.

Iowa Department of Public Health
Early Hearing Detection and Intervention Program
Lucas State Office Building, 5th Floor
321 E. 12th Street
Des Moines, IA 50319
Fax: (515) 242-6013

Why is this communication necessary?

This communication allows the EHDI program to ensure that each child has access to necessary follow up services. It also closes the communication loop and avoids redundant referrals. For example, if a family tells Early ACCESS that they do not wish to pursue any further services, this should be communicated to the EHDI program. This way the EHDI program will not continue to make referrals to Early ACCESS when no follow up services are reported for the child.

How can I get the full text of the EHDI law and rules?

- a. *The EHDI law can be found at:*
<http://www.idph.state.ia.us/iaehdi/professionals.asp>
- b. *The EHDI rules can be found at:*
<http://www.idph.state.ia.us/iaehdi/professionals.asp>

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Is there any way around the release of information so the AEA can tell a primary care provider that a child needs further hearing screening/diagnostic assessment?

No, it is not legal to contact the primary care provider without a signed release of information. All providers must have a signed release of information before sharing any child specific information with anyone other than the state EHDI office, as defined in the EHDI administrative rules: <http://www.idph.state.ia.us/iaehdi/default.asp>

The reason the AEA previously had procedures to contact the primary care provider when a child did not come in for a rescreen was to assure that no child was *lost to follow-up*. This resulted in minimizing *lost to follow-up*. However, this procedure is no longer needed since the Early Hearing Detection and Intervention law and administrative rules were implemented in 2004. The current process that the law describes is as follows:

- The baby is screened.
- All screeners are required to report the screening information/results to the state EHDI office at the Iowa Department Public Health.
- All providers of hearing rescreens are required to report those data to the state EHDI office.
- The state EHDI office monitors all children who need rescreens. If a rescreen has not been reported within a month and a half, the EHDI office generates a referral which goes to the EA-EHDI contact at each AEA for follow up.

This procedure is designed to eliminate or minimize *lost to follow-up* and provide consistency in Iowa.

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Should an *Early ACCESS Authorization for Exchange of Information* be signed?

EHDI: The *EA Authorization for Exchange of Information* is not required for an audiologist to enter information into the eSP database. Audiologists are required by law to report hearing screening, rescreen and diagnostic results (including no-show appointments) for children under 3 to IDPH. If the family refuses a rescreen and the pre-service coordinator is not an audiologist, the pre-service coordinator should communicate that refusal to an audiologist. That audiologist should report the refusal in eSP, otherwise that child will keep showing up as needing follow-up until it is reported in eSP.

EA: The *EA Authorization for Exchange of Information* would be used in a couple of circumstances:

- In cases where audiologists are not pre-service coordinators, EA personnel need a signature on the *Authorization for Exchange of Information* form to report contact with the family to IDPH due to FERPA. Pre-service coordinators can then send the completed *Referral for Hearing/Audiology Follow Up Services* form to IDPH.
- In cases where EA is providing early intervention services to a child, the family must sign the *EA Authorization for Exchange of Information* form so they can report enrollment in EA to the IDPH. An audiologist would still be required by law to report the screen, re-screen, or diagnostic results on a child in EA.

As a general practice, it is better to side on getting a signed release and list the pre-service coordinator's agency as one of the agencies. It is documentation that families were well-informed about who will be exchanging information.

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If, when a pre-service coordinator contacts a family, they report that the child has already had a rescreen and does not need any further follow-up, does the pre-service coordinator need to get results from the screening facility to complete the bottom of the *Referral for Hearing/Audiology Follow Up Services* form?

No. However, if the AEA person talking to the family is able to get more information (especially screening location), the EHDI program would appreciate knowing that. This will allow us to follow-up with the rescreen provider to make sure they know about and follow reporting requirements. Otherwise, please get enough information to complete the bottom of the form and return it to the EHDI program.

Some of the children I received pre-service coordination referrals for have results of pass/pass listed in eSP. Why did I receive these referrals?

The results may have been entered after the referral was made. When this happens, please get the names of the children to the EHDI program so we can make any necessary changes.

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I received referral forms for two children whose results I've already reported to the EHDI program via paper forms. Should I also enter the results into eSP.

Yes. Please enter the results into eSP and forward the children's names to the EHDI program so we can pull the paper reporting form and avoid duplicate entry.

I had already scheduled an appointment for some of the children for whom I received a referral form. How should I let the EHDI program know?

Please enter the children's results at their scheduled appointments. We plan to run referral reports the last week of each month, so if the appointment is scheduled after the next referrals will come out, you may want to indicate in eSP that the child has an appointment scheduled. The best way to do this is to use the appointments feature. This would keep the child from being referred for EA pre-service coordination.

I had a child scheduled, but the family cancelled due to difficulty making it to the appointment (transportation, child care, etc.). What happens now?

Helping the family work through these difficulties is a part of Early ACCESS pre-service coordination. If you are not an EA pre-service coordinator, please contact that person in your region for assistance.

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The result on some children's referral forms was different than what the local hospital reported to the AEA. What should I do?

Please get the names of the children to the State EHDI Office. We will follow-up with the birth hospital to determine the correct results. This will also give us a chance to discuss quality assurance issues with the hospital.

How do we get the official list of rescreening centers in our area so we can inform parents of all their options?

Each AEA will know locally what is available. A list of diagnostic centers, hospitals that perform outpatient hearing screens, as well as private audiologists who have responded to the EHDI program is available on the EHDI Web site, <http://www.idph.state.ia.us/iaehdi/default.asp>.

What is the plan for getting results of rescreens done at doctors' offices or other audiology offices?

If the parent reports results of a rescreen at a physician office to you, please report that to the State EHDI Coordinator. The EHDI Coordinator will follow up directly with the offices regarding reporting requirements.
